- (d) Center operation. (1) A PACE organization must operate at least one PACE center either in, or contiguous to, its defined service area with sufficient capacity to allow routine attendance by participants.
- (2) A PACE organization must ensure accessible and adequate services to meet the needs of its participants. If necessary, a PACE organization must increase the number of PACE centers, staff, or other PACE services.
- (3) If a PACE organization operates more than one center, each center must offer the full range of services and have sufficient staff to meet the needs of participants.
- (e) Center attendance. The frequency of a participant's attendance at a center is determined by the interdisciplinary team, based on the needs and preferences of each participant.

§ 460.100 Emergency care.

- (a) Written plan. A PACE organization must establish and maintain a written plan to handle emergency care. The plan must ensure that CMS, the State, and PACE participants are held harmless if the PACE organization does not pay for emergency services.
- (b) Emergency care. Emergency care is appropriate when services are needed immediately because of an injury or sudden illness and the time required to reach the PACE organization or one of its contract providers, would cause risk of permanent damage to the participant's health. Emergency services include inpatient and outpatient services that meet the following requirements:
- (1) Are furnished by a qualified emergency services provider, other than the PACE organization or one of its contract providers, either in or out of the PACE organization's service area.
- (2) Are needed to evaluate or stabilize an emergency medical condition.
- (c) An emergency medical condition means a condition manifesting itself by acute symptoms of sufficient severity (including severe pain) such that a prudent layperson, with an average knowledge of health and medicine, could reasonably expect the absence of immediate medical attention to result in the following:
- (1) Serious jeopardy to the health of the participant.

- (2) Serious impairment to bodily functions.
- (3) Serious dysfunction of any bodily organ or part.
- (d) Explanation to participant. The organization must ensure that the participant or caregiver, or both, understand when and how to get access to emergency services.
- (e) On-call providers. The plan must provide for the following:
- (1) An on-call provider, available 24-hours per day to address participant questions about emergency services and respond to requests for authorization of urgently needed out-of-network services and post stabilization care services following emergency services.
- (2) Coverage of urgently needed outof-network and post-stabilization care services when either of the following conditions are met:
- (i) The services are preapproved by the PACE organization.
- (ii) The services are not preapproved by the PACE organization because the PACE organization did not respond to a request for approval within 1 hour after being contacted or cannot be contacted for approval.

§ 460.102 Interdisciplinary team.

- (a) Basic requirement. A PACE organization must meet the following requirements:
- (1) Establish an interdisciplinary team at each center to comprehensively assess and meet the individual needs of each participant.
- (2) Assign each participant to an interdisciplinary team functioning at the PACE center that the participant attends.
- (b) Composition of interdisciplinary team. The interdisciplinary team must be composed of at least the following members:
 - (1) Primary care physician.
 - (2) Registered nurse.
 - (3) Social worker.
 - (4) Physical therapist.
 - (5) Occupational therapist.
- (6) Recreational therapist or activity coordinator.
 - (7) Dietitian.
 - (8) PACE center manager.
 - (9) Home care coordinator.
- (10) Personal care attendant or his or her representative.